

# NEUROENDOCRINE TUMORS (NETs). RESPONSE TO CHEMOTHERAPY BY HISTOLOGICAL GRADE. EXPERIENCE CENTER.

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## INTRODUCTION

NETs are candidates for a treatment where chemotherapy occupies a place especially in those with high histological grade (G3). In NETs with low-moderate grade (G1-2) the role of chemotherapy is controversial. The aim of our study is to analyze the role of chemotherapy in NETs and its relation to histologic grade.

## MATERIALS AND METHODS

We analyzed 30 patients from our Unit with NETs who started treatment with first-line chemotherapy in January 2003 to May 2013. The median age was 52.5 years (28-76 years). ♂: 76.7% / ♀: 23.3%. Three patients (10%) had pancreatic location and 27 patients (90%) had not pancreatic location (11 patients lung, 3 patients intestinal and 13 patients other site). 94.4% of the patients had more than one metastatic site (nodal sites more frequently). Twelve patients (40%) were G1-2 and 18 patients (60%) were G3. From patients G1-2 the most common site was the lung.

The First-line chemotherapy treatment was: 7 patients received cisplatin/carboplatin-etoposide, 3 patients received streptozotocin-5FU and 2 patients received other chemotherapy. For those patients who progressed on their disease (6 patients) received another line of chemotherapy. From patients G3 the most common site was the lung. All patients received cisplatin/carboplatin-etoposide as first-line chemotherapy and those with progression in their disease (10 patients) received another line of chemotherapy.

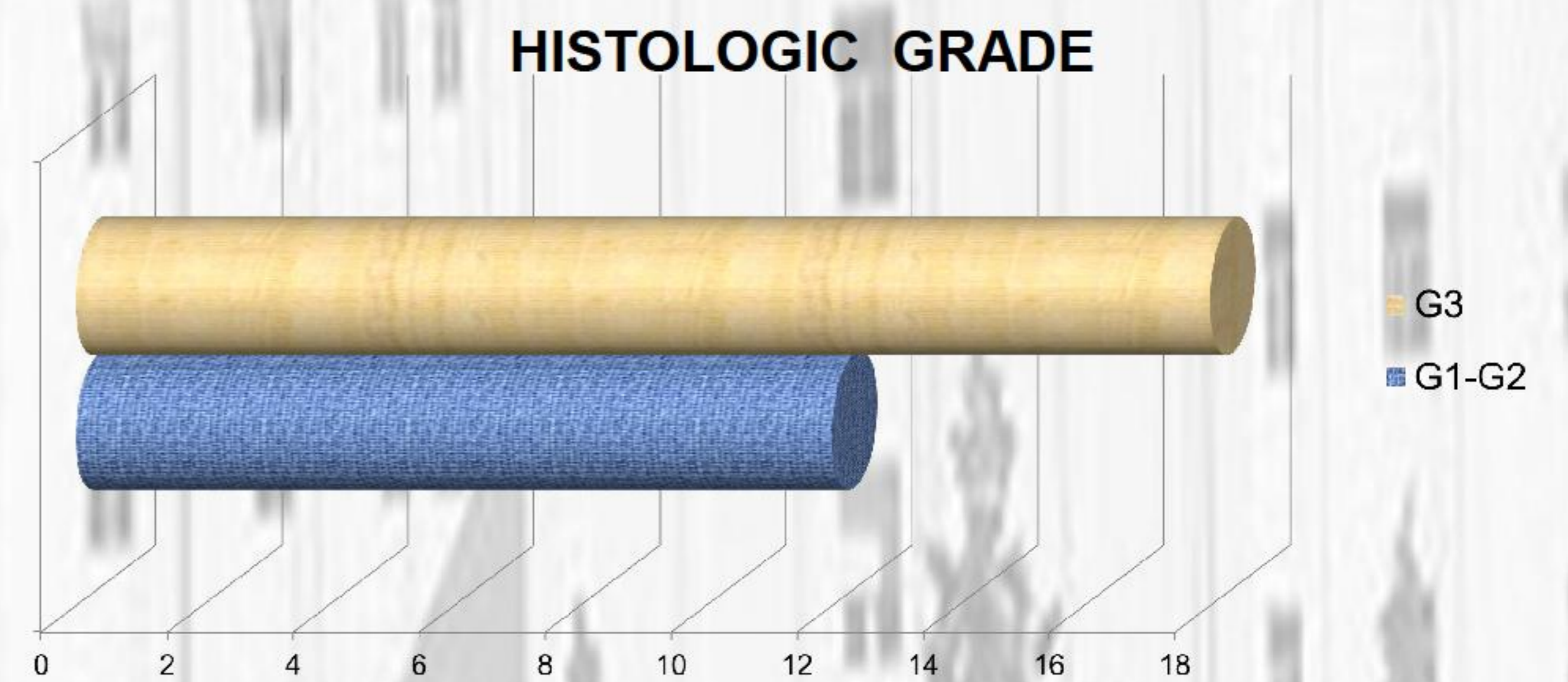
## RESULTS

23 patients obtained a clinical benefit (76.7% of patients) with partial response or stabilization of the disease. Depending on histologic grade, from G1-2 patients at 3 months of treatment initiation 87.5% had not progression of the disease. Median progression-free survival was 14 months and Median overall survival was 57 months with a survival rate on 54.5% at 4 years.

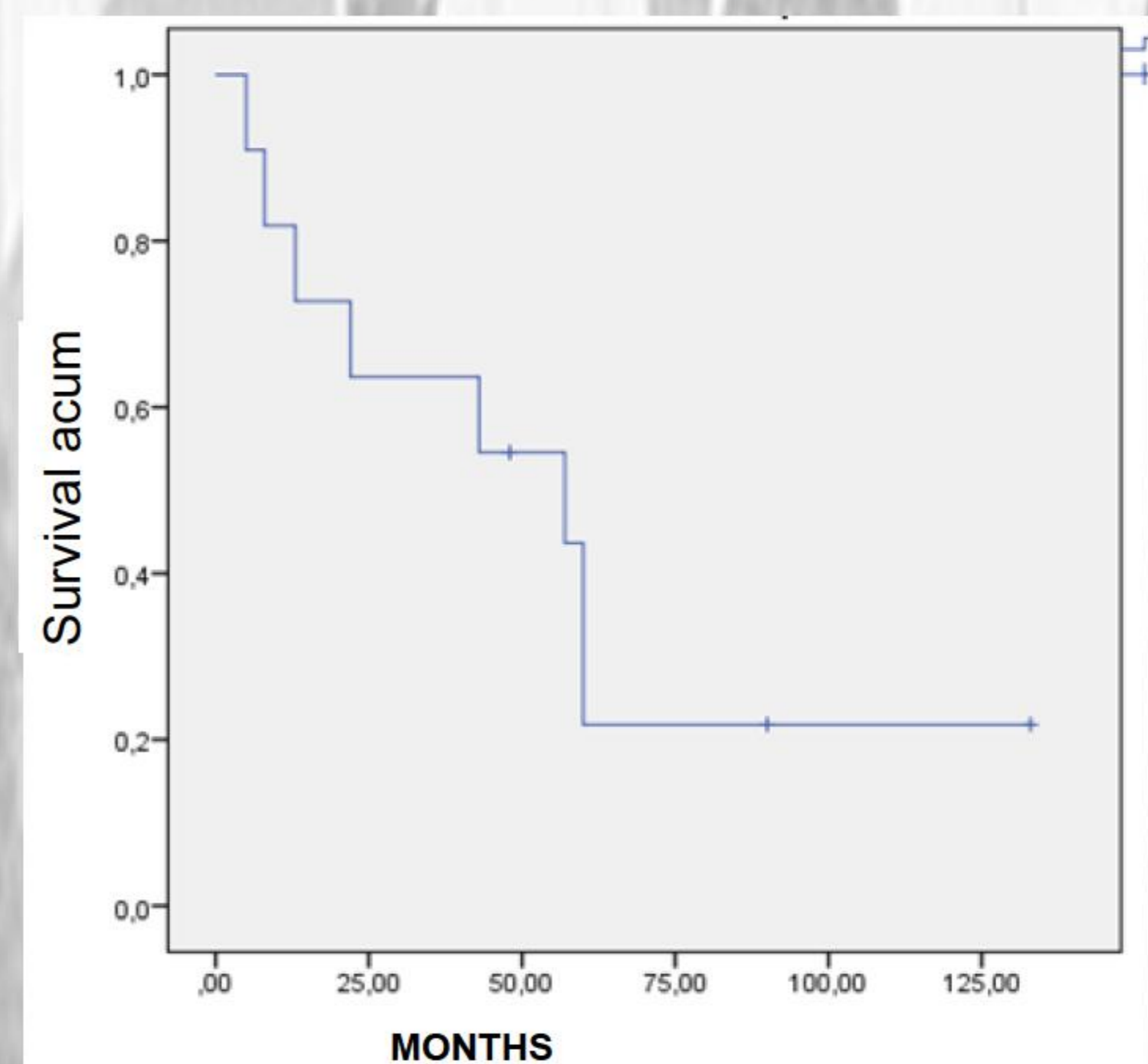
From G3 patients at 3 months of starting treatment, 69.2% showed no progression. Median progression-free survival was 9 months and Median overall survival was 8 months with a survival rate of 16.7% at 2 years.

## CONCLUSIONS

Our study demonstrates the role of chemotherapy in patients G3, although it remains a group of patients with the worst prognosis and faster progression compared to NETs with histological grade G1-2.



OVERALL SURVIVAL  
G1-G2 PATIENTS



OVERALL SURVIVAL  
G3 PATIENTS

